

Monthly  
LHD Call  
January  
10, 2023



# Opening Remarks

<b>Opening Remarks</b>	<b>Doug Urland, MPA</b> LHD Operations Liaison
<b>Epi Picture/CDC Mpox Funding</b>	<b>Zack Moore, MD, MPH</b> State Epidemiologist and Epidemiology Section Chief
<b>Flu/COVID-19 and Mpox Vaccine Update</b>	<b>Carrie Blanchard, PharmD, MPH</b> Immunization Branch Interim Director
<b>COVID-19/Mpox Testing and Therapeutics Updates</b>	<b>Tim Davis, PharmD, BCNP, PMP</b> Medical Countermeasures Coordinator
<b>CI/CT Update</b>	<b>Laura Farrell</b> Contact Tracing Program Manager
<b>NCEDSS/COVID Update</b>	<b>Anita Valiani, MPH</b> NC EDSS Epidemiologist and Manager
<b>Question &amp; Answer Session</b>	<b>Open for Questions – Please use the Zoom Q&amp;A function</b>

# Epi Picture/CDC Mpox Funding

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# Flu/COVID-19 and Mpox Vaccine Update

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# **FLU AND COVID-19 UPDATES**

## UPCOMING VIRTUAL MEETINGS

- On **January 26th**, VRBPAC will consider whether and how the composition and schedule for primary doses and boosters should be modified.
- The ACIP is scheduled to meet February 22<sup>nd</sup> and 23<sup>rd</sup>.



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Following [FDA authorization](#), the [CDC has recommended](#) the use of updated (bivalent) COVID-19 vaccines to children aged 6 months through 5 years. Unlike for older age groups, **these products are not eligible for mix-and-match use.**

1. **Moderna:** Children ages 6 months through 5 years who previously completed a Moderna primary series can now receive a Moderna bivalent booster 2 months after their final primary series dose.
2. **Pfizer:** Children ages 6 months through 4 years who are completing a Pfizer primary series will receive a Pfizer bivalent vaccine as their third primary dose. **Effective immediately, the third dose of Pfizer (monovalent) is no longer authorized for this age group.**

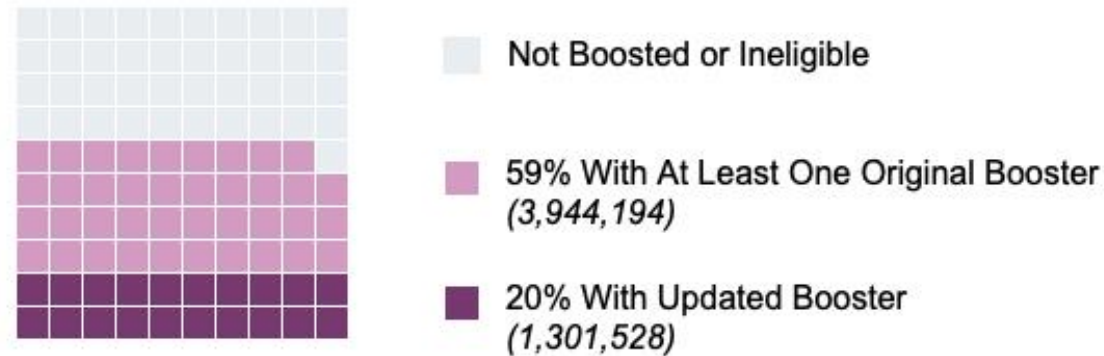
[Access the Updated Statewide Standing Orders Here](#)

[Order COVID-19 Vaccines Here](#)



# COVID-19 VACCINE UPTAKE IN NC

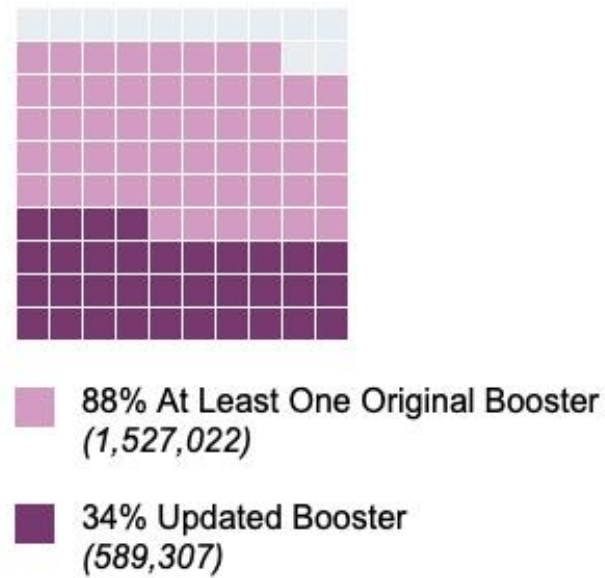
## All Ages



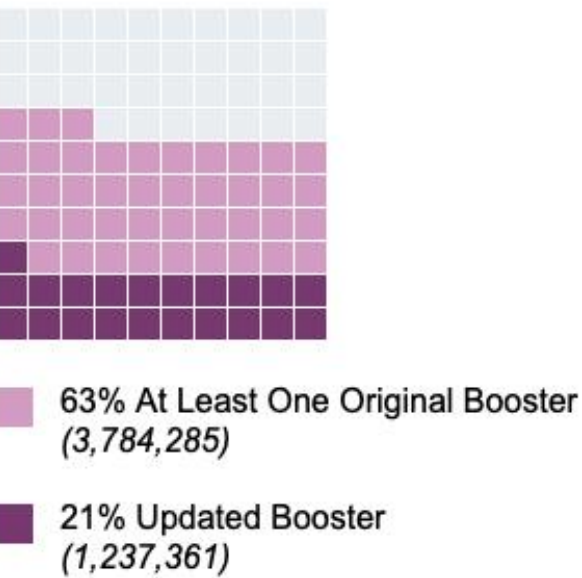
## Boosters

These data shows COVID-19 booster doses as a percentage of those who finished their initial vaccine. This includes additional doses which can be given to immunocompromised people. Explore the rest of the dashboard [here](#).

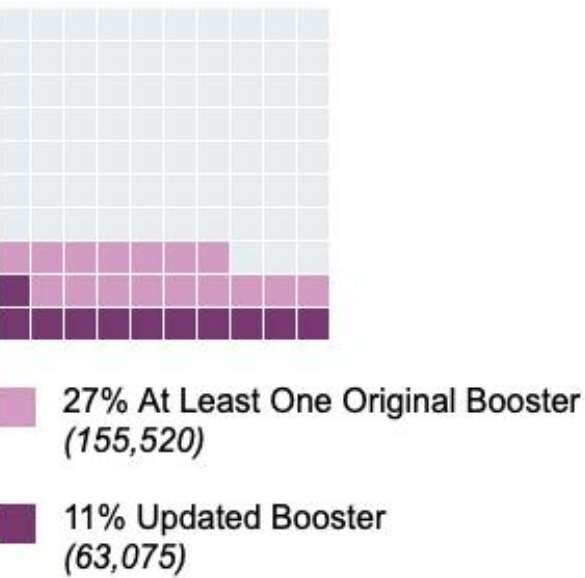
## 65+ Year Olds



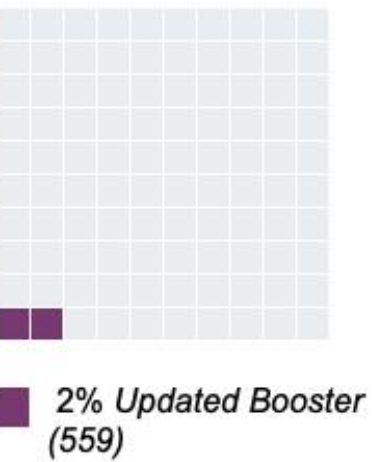
## 18+ Year Olds



## 5-17 Year Olds



## 0-4 Year Olds





# Most U.S. adults have not yet received an updated (bivalent) COVID-19 booster



An **updated booster** may reduce your risk of severe COVID-19 by 50% or more\*



**For the best protection, get an updated booster**



\*Vaccine effectiveness varied based on previous vaccination status of the control group and outcome studied

[bit.ly/MMWR\\_COVIDVaccination](https://bit.ly/MMWR_COVIDVaccination)

DECEMBER 16, 2022

**MMWR**

# VACCINE EXPIRATION DATE EXTENSION AND BEYOND-USE DATES (BUD)



## Pfizer-BioNTech COVID-19 Vaccine Expiration Date Extension and Beyond-Use Dates (BUD)

- The FDA has extended the expiration date for Pfizer COVID-19 vaccine (monovalent and bivalent) from 12 to **18 months** from manufacturer date.
  - This expiration date extension applies to both vaccine vials currently stored at ultra-cold temperatures (-90°C and -60°C [- 130°F and -76°F]) and at refrigerated temperatures (2°C and 8°C [36°F and 46°F]).
- Before discarding any vaccine, please check vaccine expiration dates using [Pfizer-BioNTech's Expiration Date Checker](#)



## Moderna COVID-19 Vaccine Expiration Date Extension and Beyond-Use Dates (BUD)

- The FDA has extended the expiration date for select lots of Moderna COVID-19 vaccine (monovalent). This extension includes some lots of Moderna COVID-19 Vaccine (ages 12+ and 6-11).
  - This expiration date extension applies to both vaccine vials currently stored at both frozen temperatures between (-50°C and -15°C [-58°F and 5°F]) and refrigerated temperatures (2°C and 8°C [36°F and 46°F])
- Before discarding any vaccine, please check vaccine expiration dates using [the Moderna Vial Expiration Checker](#).



## MERGING OPERATIONS: CVMS TO NCIR TRANSITION

Due to mass vaccination demands during initial roll out of the COVID-19 vaccine, the state utilized the COVID-19 Vaccine Management System (CVMS) as a mass vaccination module to track vaccine supply and administration. Now that COVID-19 vaccines are part of routine care, NCDHHS is beginning to return the routine management of COVID-19 vaccine to the North Carolina Immunization Registry (NCIR).

### What's Next?

- The transition to NCIR will be done in stages. Practices who need to transition from CVMS to NCIR are beginning to be contacted by DHHS.
- **VFC providers** may reference this email for further instructions on how to transition to NCIR.



## SAVE THE DATE: VACCINES FOR CHILDREN 2023 TRAINING SESSIONS

Join us for the **2023 NCDHHS VFC Virtual Training!** This virtual training will address new immunization recommendations and changes in best practices. Sessions will repeat on **March 28** and **April 4**.



**MARCH 28**

8:30am - 12:15pm

**APRIL 4**

1:00pm - 4:45pm



**CEUs available upon completion  
of either session!**



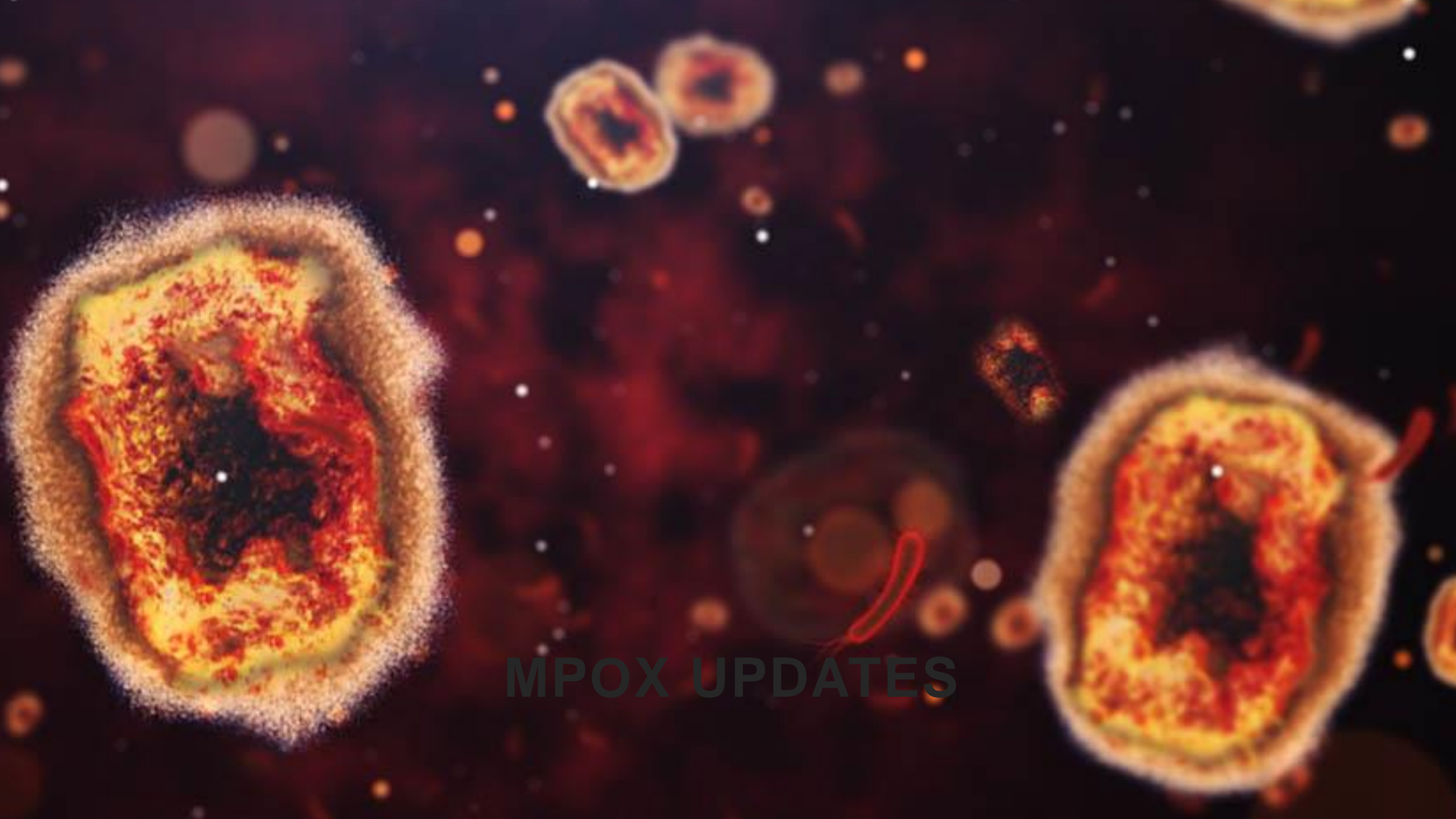
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# AGREEMENT ADDENDUM 715 OR 716 FUNDS

- AA 715 supports general immunization services and administration of vaccines
- AA 716 supports COVID-19 vaccine services and administration of COVID-19 vaccines
- Neither allow for the purchase of vaccines

[Access the AA715 Allowable Expenditure Chart](#)





**MPOX UPDATES**

# MPOX OFFICE HOURS DISCONTINUED

- Immunization Branch is discontinuing the Mpox office hours.
- You may also refer to the following resources:
  - [NCDDHHS Mpox website](#)
  - [JYNNEOS FAQ document](#)
  - [Interim Clinical Considerations for Use of JYNNEOS and ACAM2000 Vaccines during the 2022 U.S. Monkeypox Outbreak](#)

# Update to Mpox Vaccination Program Provider Agreement to allow for more flexibility in administration routes

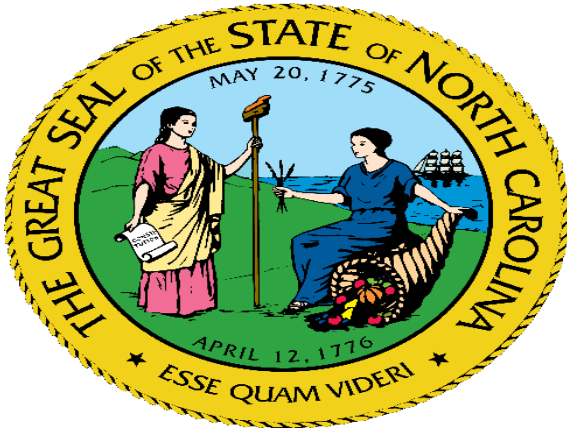
- Previous Guidance: All doses of JYNNEOS must be administered intradermally (unless contraindicated)
- **New Guidance:** Healthcare providers should decide whether to offer the intradermal or subcutaneous regimen based on balancing optimal vaccination use and acceptance, feasibility of administration, and available vaccine supply.

[Access the Mpox Vaccination Program Provider Agreement Here](#)



# COVID-19/Mpox Testing and Therapeutics Updates

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# **COVID-19 Testing/Therapeutics and Oseltamivir Shortage Updates**

**Tim Davis, PharmD**

**Medical Countermeasures Coordinator**

**North Carolina Public Health Preparedness and Response**

# COVID Testing Updates:

**Community Access Points (CAPs)**

**Vendor Supported COVID-19 Community Testing**

**Potential Pilot of LTS testandgo Kiosks**

# Continue to Recruit Community Access Points (CAPs)

- Only three counties remain without a CAP
  - Alexander, Moore, Rutherford
- Becoming a CAP is EASY!
  - For more information:
    - <https://covid19.ncdhhs.gov/testing-treatment/information-testing-providers-and-partners#free>
  - To order at-home tests kits:
    - <https://app.smartsheet.com/b/form/231af981469c452f9a81045c2fee1f2a>
    - We have transitioned to a weekly ordering schedule
      - Monday 10 a.m. deadline; shipments occur the following week
- Rapid antigen tests remain effective at detecting the current circulating variants

In Need of Support?  
COVID-19 Testing and  
Therapeutics Inquiry Intake  
Form



# **Vendor Supported COVID-19 Community Testing**

- **Vendor supported community testing is currently funded by FEMA**
  - FEMA funding expected to end in early 2023
  - Expect at least a 30-day notice from FEMA
- **Vendor supported testing will end by 3/31/2023 or sooner**
  - Depends on timing of FEMA funding sunset
  - All testing vendor contracts expire on or before 3/31/2023
- **Community based organizations have been central to this response**
  - Continue to explore new ways of working together

# TESTANDGO® SELF-SERVICE KIOSK PILOT

DELIVERS CARE TO PATIENTS THROUGH DECENTRALIZED ACCESS POINTS ACCESSIBLE 24/7/365 WITHIN THE LOCAL COMMUNITY

## Services / Tests

NOW

- COVID-19
  - PCR
  - Antigen

FUTURE

- Vend: COVID + Flu, STI / HIV, CVD / DM, Naloxone, Fentanyl strips
- Telemedicine
- Prescriptions

## Value

- No-Cost Testing is free for individuals regardless of insurance status, who are:
  - Symptomatic
  - Exposed
- Access to Care –
  - Convenience, weather, availability
- Payors (3<sup>rd</sup> party)
- No clinical staff

## Requirements

- Outside electrical outlet; cellular connection or WIFI (handled by LTS)
- ADA compliant area
- Free parking and access to all persons
- SVI minimum 0.5 or Higher (Medium-High/HIGH)



[Watch testandgo Kiosk Demo](#)

## FAQ'S

?	Answers
How long is the ICATT contract good for?	Current POP is until end of May 2023, contract extends until 2025
What is the cost to the state/county/city?	None (if kiosks are placed under ICATT)
Who maintains the kiosk?	LTS provides personnel: re-stock kits; retrieve specimens to send to the lab; and handle any maintenance on the machine. This is a service provided.
What does a site need?	Outside electrical outlet; Kiosk needs cellular connection or WIFI (handled by LTS); ADA compliant area; free parking and access to all persons
What data will the state get?	Data is sent to HHS protect as well as the state for any reportable disease requirements
What happens after the ICATT contract ends?	LTS will work with states to identify other funding streams to cover cost of keeping kiosks in state
Is there a minimum number of tests/week?	15-20/kiosk/week

# COVID Therapeutics Updates:

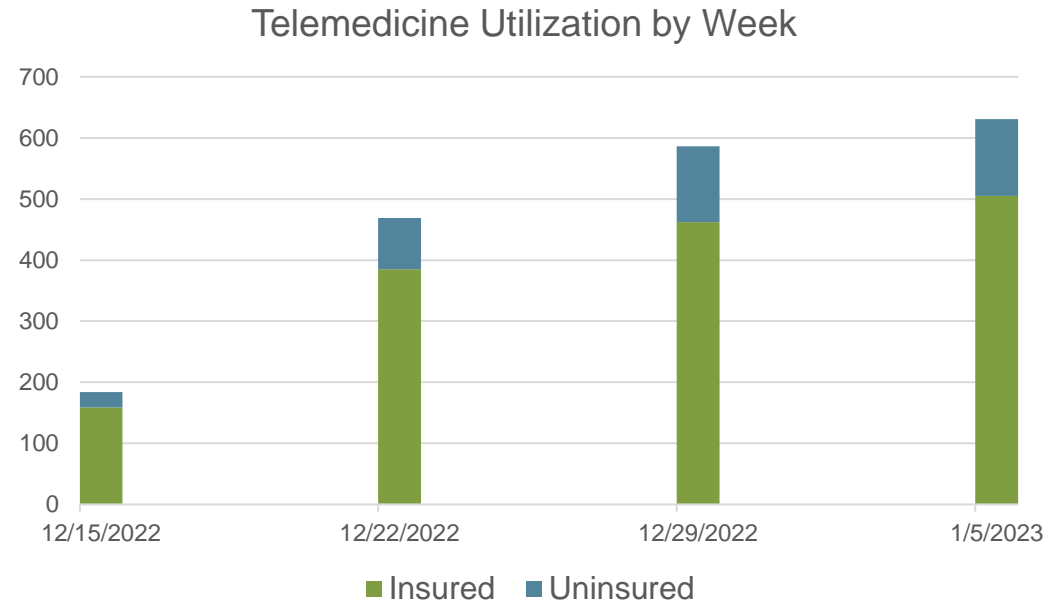
## COVID Telemedicine Partnership with StarMed Healthcare



# Statewide COVID-19 Telemedicine Platform Launched 12/13

- Partnership with StarMed Healthcare to offer FREE telemedicine screenings
  - [www.starmed.care/nc](http://www.starmed.care/nc) or 704-941-6000
- Available 7 days a week, 9am to 7pm
- No cost passed to patient, regardless of insurance status
  - Personal insurance will be billed, if available
- ID not required to participate
- Website and registration form available in 7 languages
  - Consultations available in more than 200 languages (including ASL)
- Prescriptions sent to pharmacy of choice or mail-ordered overnight
- Time-limited program, estimated to last until mid-March

# Initial Telemedicine Program Data



**Please help us promote this telemedicine program to your patients!**

- [English/Spanish Flyer](#)
- [Social Media Tool Kit](#)
- **Make-A-Plan Flyer \*Coming Soon\***

## Overall Statistics

Total individuals	1870
Uninsured Total	19%
Prescription Success	~90%
Paxlovid	~80%
Lagevrio	~20%

## How did they hear about us?

Google/Internet Search	34.4%
Family/Friend	33.4%
DHHS/Health Department Referral	18.1%
StarMed Testing Site	8.3%
Social Media	3.4%
CAP site	1.5%
On Location	1.0%

# Oseltamivir Shortage Situation:

## Survey Responses and Extended Tamiflu Supply

# Oseltamivir Shortage

- Thank you for completing our survey!
  - 168 Responses (LHDs and Hospitals)
- Key Hospital Takeaways
  - Oseltamivir generally available on allocation from wholesaler
  - 5 hospitals indicated “immediate need”
    - Upon follow-up these needs were not urgent
- Key LHD takeaways
  - Hearing from providers of difficulty locating oseltamivir for patients
  - No urgent needs
- Major Pharmacy Partners (CVS, Walgreens, WalMart, Ingles, & CPESN)
  - Experiencing intermittent supply issues not uncommon for this time of year
  - Pediatric liquid formulation more difficult to come by, but able to compound

# Extended Tamiflu Supply

## ASPR Webpage: Improving Access to Influenza Countermeasures for U.S. Jurisdictions

- 29 Locations reported having extended Tamiflu in their local stockpile
  - 23 LHDs and 6 Hospitals
  - 1800+ courses reported total
- ONLY Tamiflu purchased by states during 2009 subsidy program eligible for use right now
  - This is represented by Table #2 at link above
  - 12 Locations reported having lot numbers of “state purchased” product that could be used right now:
    - Lot # U2114 (75mg) – 273 courses reported
    - Lot # B1008-01 (30mg) – 380 courses reported
- What now?
  - Continue to monitor situation
  - Reach out to [phpr.sns@dhhs.nc.gov](mailto:phpr.sns@dhhs.nc.gov) if experiencing major supply issues and plan to use extended supply
  - If situation worsens, Tamiflu is requestable from SNS

[Interim Guidance for Clinicians to Prioritize Antiviral Treatment of Influenza in the Setting of Reduced Availability of Oseltamivir](#)

# CI/CT Update

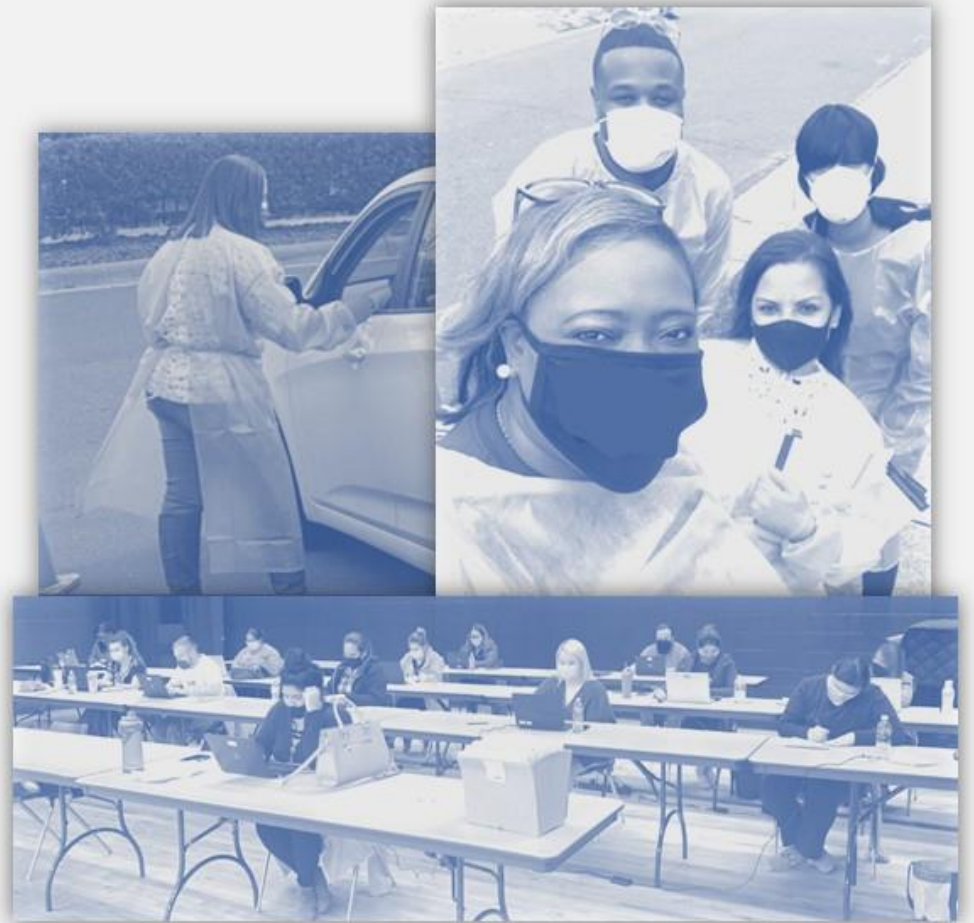
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# NC DHHS Case Investigation & Contact Tracing

**LHD Meeting**

**January 10, 2023**



## CCTC CLINICAL PROGRAM UPDATE (SHARED BY EMAIL 11/30/22)

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**As of March 1, 2023, CCTC staff will no longer administer vaccines or tests for COVID-19 or any other diseases.** From now until March, CCTC staff can continue to administer vaccine and tests as needed.

The following AA funds can be alternate sources of support for this work:

- **AA 546** – *Can be used for surveillance, detection, control, and prevention of any communicable diseases, including, but not limited to COVID-19. Please contact Megan Smith at [megan.smith1@dhhs.nc.gov](mailto:megan.smith1@dhhs.nc.gov) with any questions.*
- **AA715**- *Can be used to support all immunization services delivery as well as activities that provide immunization education and outreach. For details on allowable expenses, visit the [North Carolina Immunization Program \(NCIP\) Requirements page](#). Please contact Wendy Holmes at [wendy.holmes@dhhs.nc.gov](mailto:wendy.holmes@dhhs.nc.gov) with any questions.*
- **AA716**- *Can be used for activities that focus on removing the barriers to accessing COVID-19 vaccine, increasing COVID-19 vaccine confidence, coordinating COVID-19 vaccine services, and expanding its COVID-19 vaccination program. Please contact Haley Shigas at [Haley.Shigas@dhhs.nc.gov](mailto:Haley.Shigas@dhhs.nc.gov) or Wendy Holmes at [wendy.holmes@dhhs.nc.gov](mailto:wendy.holmes@dhhs.nc.gov) with any questions.*

**Please note that these updates are related to the CCTC Clinical Program only, and have no impact on CCTC CI/CT, data entry, call center or non-clinical vaccine or testing supports.**

## CI/CT PROGRAM WIND DOWN- LONG TERM GOALS

Over the coming year, as the COVID-19 response and federal funds wind down, we expect to also be winding down the CI/CT Program, including the support of CCTC staff. Here are the goals that we have prepared to guide us through this process.



Shift focus to where COVID-19 outreach can have the biggest impact



Align reductions in CCTC staff with reductions in response expectations



Transition remaining COVID-19 activities at a reasonable and steady pace



Learn from COVID and integrate what we've learned into overall public health response

## CI/CT PROGRAM WIND DOWN- UPCOMING CHANGES

**Effective 12/19:**  
Guidance changes to  
focus outreach on  
linkage to treatment  
and resources

- Case investigation interviews are no longer recommended
- Outreach guidance prioritizes informational calls to cases patients aged 65+ and supports connection to new treatment telehealth program
- Transition to this guidance for CCTC staff can start now or happen any time prior to April 1, 2023

**April 2023:** CCTC  
staffing model will  
change to align with  
updated outreach  
guidance

- CCTC staff will make phone calls to case patients based on updated outreach guidance only
- CCTC staff management will be centralized and follows guidance strictly (LHD-specific outreach patterns end, staff no longer report to LHD offices)
- All services currently provided by the CCTC Data Entry team are expected to be maintained.

# COVID-19 CI/CT GUIDANCE UPDATE- EFFECTIVE 12/19



Shift focus to where COVID-19 outreach can have the biggest impact: linkage to treatment and resources

Current CI/CT Prioritization Guidance	Updated Case Outreach Prioritization Guidance
Interviews for case patients reported to be linked to a cluster/outbreak or reported as living in a congregate or healthcare setting	Informational calls to case patients aged 65+
Interviews for case patients known to be working or potentially exposed in a high-density setting	
Informational calls to case patients whose CCTO record indicates their text was not delivered	Informational calls to case patients whose CCTO record indicates their text was not delivered
Informational calls to case patients in populations most likely to have resource needs	Informational calls to case patients in populations most likely to have resource needs based on SVI index

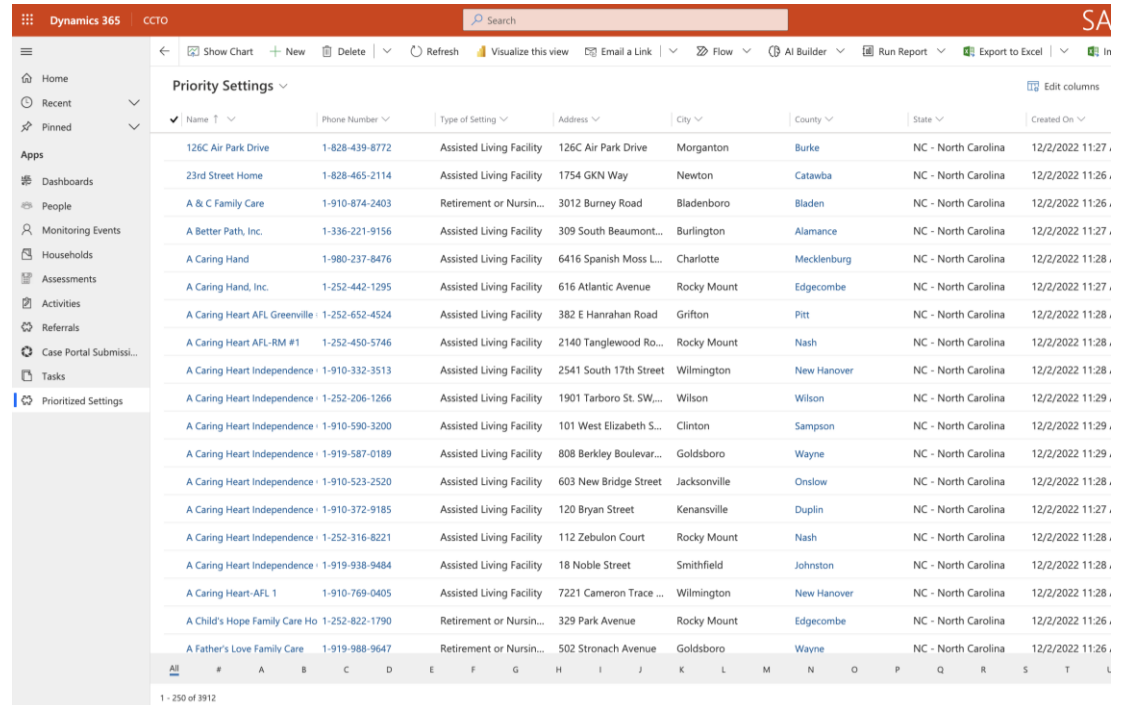


# COVID-19 CI/CT GUIDANCE UPDATE- EFFECTIVE 12/19

## Continue to follow outbreak and cluster guidance

- While the CI/CT outreach guidance is changing, outbreak reporting guidance will remain the same and outbreaks/clusters reported to LHDs should continue to be reported to the state.
- Interviewing to identify outbreaks is no longer recommended
- Few outbreak/clusters were being identified by interviews. A small number of outbreaks/clusters may be missed without interviews.
- Guidance is always subject to change and DHHS or LHDs may still recommend interviews in specific cluster/outbreak situations.

New CCTO priority settings functionality can support identification of outbreaks with minimal staff effort. See the job aid on the CD manual to learn more.



The screenshot displays the Dynamics 365 CCTO interface. The left sidebar shows navigation options like Home, Recent, Pinned, and various Apps including Dashboards, People, Monitoring Events, Households, Assessments, Activities, Referrals, Case Portal Submiss..., and Tasks. The main area shows the 'Priority Settings' table with columns for Name, Phone Number, Type of Setting, Address, City, County, State, and Created On. The table lists various assisted living facilities and retirement homes across North Carolina, with their respective phone numbers and addresses. The bottom of the table shows a pagination bar indicating 1 - 250 of 3912 records.

Name	Phone Number	Type of Setting	Address	City	County	State	Created On
126C Air Park Drive	1-828-439-8772	Assisted Living Facility	126C Air Park Drive	Morganton	Burke	NC - North Carolina	12/2/2022 11:27
23rd Street Home	1-828-465-2114	Assisted Living Facility	1754 GKN Way	Newton	Catawba	NC - North Carolina	12/2/2022 11:26
A & C Family Care	1-910-874-2403	Retirement or Nursin...	3012 Burney Road	Bladenboro	Bladen	NC - North Carolina	12/2/2022 11:26
A Better Path, Inc.	1-336-221-9156	Assisted Living Facility	309 South Beaumont...	Burlington	Alamance	NC - North Carolina	12/2/2022 11:27
A Caring Hand	1-980-237-8476	Assisted Living Facility	6416 Spanish Moss L...	Charlotte	Mecklenburg	NC - North Carolina	12/2/2022 11:28
A Caring Hand, Inc.	1-252-442-1295	Assisted Living Facility	616 Atlantic Avenue	Rocky Mount	Edgecombe	NC - North Carolina	12/2/2022 11:27
A Caring Heart AFL Greenville	1-252-652-4524	Assisted Living Facility	382 E Hanrahan Road	Grifton	Pitt	NC - North Carolina	12/2/2022 11:28
A Caring Heart AFL-RM #1	1-252-450-5746	Assisted Living Facility	2140 Tanglewood Ro...	Rocky Mount	Nash	NC - North Carolina	12/2/2022 11:28
A Caring Heart Independence	1-910-332-3513	Assisted Living Facility	2541 South 17th Street	Wilmington	New Hanover	NC - North Carolina	12/2/2022 11:28
A Caring Heart Independence	1-252-206-1266	Assisted Living Facility	1901 Tarboro St. SW...	Wilson	Wilson	NC - North Carolina	12/2/2022 11:29
A Caring Heart Independence	1-910-590-3200	Assisted Living Facility	101 West Elizabeth S...	Clinton	Sampson	NC - North Carolina	12/2/2022 11:29
A Caring Heart Independence	1-919-587-0189	Assisted Living Facility	808 Berkley Boulevar...	Goldsboro	Wayne	NC - North Carolina	12/2/2022 11:29
A Caring Heart Independence	1-910-523-2520	Assisted Living Facility	603 New Bridge Street	Jacksonville	Onslow	NC - North Carolina	12/2/2022 11:28
A Caring Heart Independence	1-910-372-9185	Assisted Living Facility	120 Bryan Street	Kenansville	Duplin	NC - North Carolina	12/2/2022 11:27
A Caring Heart Independence	1-252-316-8221	Assisted Living Facility	112 Zebulon Court	Rocky Mount	Nash	NC - North Carolina	12/2/2022 11:28
A Caring Heart Independence	1-919-938-9484	Assisted Living Facility	18 Noble Street	Smithfield	Johnston	NC - North Carolina	12/2/2022 11:28
A Caring Heart-AFL 1	1-910-769-0405	Assisted Living Facility	7221 Cameron Trace ...	Wilmington	New Hanover	NC - North Carolina	12/2/2022 11:28
A Child's Hope Family Care Ho	1-252-822-1790	Retirement or Nursin...	329 Park Avenue	Rocky Mount	Edgecombe	NC - North Carolina	12/2/2022 11:26
A Father's Love Family Care	1-919-988-9647	Retirement or Nursin...	502 Stronach Avenue	Goldsboro	Wayne	NC - North Carolina	12/2/2022 11:26

## CCTC STAFFING UPDATE- APRIL 2023

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As of April 2023:

- CCTC staff will be centralized with consistent workflows statewide; staff will make informational calls (no interviews) to case patients as directed by updated outreach guidance only.
- CCTC outreach calls will take place for all counties (opt out only considered where LHD staff are making calls based on the outreach guidance).
- CCTC Data Entry team services are expected to be maintained.
- CCTC staff will continue to support other diseases as directed by DPH (e.g. Ebola/Uganda traveler response) but will not be routinely available for individual LHD-directed support of other diseases.
- CCTC Staff currently working for LHDs on-site will need to shift to remote, centralized work.
  - Requests for on-site non-clinical vaccine support may be considered based on vaccine trends.
  - Any on-site data entry into LHD systems will need to shift to the state Data Entry team.
- We expect to maintain this staffing model through at least August 2023, though it is subject to change based on changes to the overall COVID-19 response.

# NCEDSS/COVID Update

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## NCEDSS/NC COVID UPDATES

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- *We will be taking NCEDSS offline on Wednesday at 5pm EST for about 4-5 hours to upload babesiosis as a new disease to be available in NCEDSS. Please ensure you have saved all work and logged out by this time.*
- *There will be a short presentation on Babesiosis presented during an upcoming NCEDSS/NC COVID office hours. Watch for an email on this*
- *We are also adding AFM and Varicella to the LHD view for vaccine preventable diseases.*
- The software we use for our NC COVID and NCEDSS applications is due for an update from the vendor. We have started the process to begin upgrading NC COVID with NCEDSS coming later. Please look out for trainings and system update messages coming your way. Every user will need to sit through a training to gain access to the new version which will have a different look and feel than the current version of NC COVID/NCEDSS.
- As a reminder we have a webinar scheduled on Thursday at 1pm on *Linking to an Outbreak* and office hours scheduled every Tuesday at 10am

# Question & Answer Session

Opening Remarks	<b>Doug Urland, MPA</b> LHD Operations Liaison
Epi Picture/CDC Mpox Funding	<b>Zack Moore, MD, MPH</b> State Epidemiologist and Epidemiology Section Chief
Flu/COVID-19 and Mpox Vaccine Update	<b>Carrie Blanchard, PharmD, MPH</b> Immunization Branch Interim Director
COVID-19/Mpox Testing and Therapeutics Updates	<b>Tim Davis, PharmD, BCNP, PMP</b> Medical Countermeasures Coordinator
CI/CT Update	<b>Laura Farrell</b> Contact Tracing Program Manager
NCEDSS/COVID Update	<b>Anita Valiani, MPH</b> NC EDSS Epidemiologist and Manager
Question & Answer Session	<b>Open for Questions – Please use the Zoom Q&amp;A function</b>



Q&A

